ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mail	75331	
O.I.P.E. CLASSIFIER	1	7	8-22000
FORMALITY REVIEW		69652	1010200
RESPONSE FORMALITY REVIEW		TT	7-7-

INDEX OF CLAIMS

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If more than 150 claims or 10 actions staple additional sheet here